PAGE 1 / 24

Image# 201607209020728306

## FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

	For Other Than An Autr	iorized Committee	Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5
Planned Parenthood	Votes		
ADDRESS (number and street)	123 William St, 10th Floor		
Check if different			
than previously reported. (ACC)	New York		NY 10038 -
2. FEC IDENTIFICATION N	NUMBER ▼ CIT	Y 🛦	STATE ▲ ZIP CODE ▲
C C00489799		THIS NEW (N) OF	AMENDED (A)
4. TYPE OF REPORT (Choose One)	Report Due On:	20 (M2) X May 20 (M	(Non-Election Year Only)
(a) Quarterly Reports:		20 (M3) Jun 20 (M6	(Non-Election Year Only)
April 15 Quarterly Report (	(O1)	20 (M4) Jul 20 (M7)	
July 15 Quarterly Report (	(Q2) 12-Day PRE-Election	Primary (12P)	General (12G) Runoff (12R)
October 15 Quarterly Report (	Report for the:	Convention (12C)	Special (12S)
January 31 Year-End Report	(YE) Election	n on	in the State of
July 31 Mid-Year Report (Non-electi Year Only) (MY)	POST-Election Report for the:	General (30G)	Runoff (30R) Special (30S)
Termination Report (TER)	rt       Election	n on	in the State of
	01 2016	through 04	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
I certify that I have examined	this Report and to the best of	my knowledge and belief it is	true, correct and complete.
Type or Print Name of Treasur	rer Liz Gustafson		
Signature of Treasurer Liz	Gustafson	[Electronically Filed]	Date 07 / 20 / 2016
NOTE: Submission of false, erro	neous, or incomplete information	may subject the person signing	this Report to the penalties of 2 U.S.C. §437g.
Office Use			FEC FORM 3X Rev. 12/2004

## SUMMARY PAGE OF RECEIPTS AND DISRUPSEMENTS

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name Planned Parenthood Votes 04 2016 04 30 2016 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 1143446.70 January 1, 2016 (b) Cash on Hand at 3134534.89 Beginning of Reporting Period..... 2066482.73 5372266.00 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6515712.70 5201017.62 6(a) and 6(c) for Column B)..... 1527329.93 2842025.01 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 3673687.69 3673687.69 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 66382.35 Schedule C and/or Schedule D) ..... This committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

## **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

P	lanned	Pare	enthod	d/	otes/
г	ıaıııcu	ган	אטו ווו וכע	JU 1	ノしにせる

	001111777	COLUMN B
I. Receipts	I. Receipts COLUMN A Total This Period	
. Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees		
(i) Itemized (use Schedule A)	2063982.73	5369716.00
(**) 11 %	0.00	50.00
(ii) Unitemized(iii) TOTAL (add	0.00	50.00
Lines 11(a)(i) and (ii)	2063982.73	5369766.00
Lines Tr(a)(i) and (ii)	7	
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	2522.00	
(such as PACs)	2500.00	2500.00
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry	2066482.73	5372266.00
Totals to Line 33, page 5)  2. Transfers From Affiliated/Other	2000-02.10	23.22000
Party Committees	0.00	0.00
Tarty Committees	3,00	
B. All Loans Received	0.00	0.00
Loan Repayments Received	0.00	0.00
5. Offsets To Operating Expenditures		
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	0.00
6. Refunds of Contributions Made		
to Federal Candidates and Other	0.00	0.00
Political Committees  7. Other Federal Receipts	0.00	0.00
(Dividends, Interest, etc.)	0.00	0.00
3. Transfers from Non-Federal and Levin Funds	0.00	0.00
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
,		
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
(b) Levin Funds (from Schedule H5)		53
Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶	2066482.73	5372266.00

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	Total This Period		
21. Operating Expenditures:  (a) Allocated Federal/Non-Federal		Calendar Year-to-Date	
Activity (from Schedule H4) (i) Federal Share	0.00	0.00	
(i) I ederal offare			
(ii) Non-Federal Share	0.00	0.00	
(b) Other Federal Operating Expenditures	136101.12	246967.29	
(c) Total Operating Expenditures	120101.12	246967.29	
(add 21(a)(i), (a)(ii), and (b))▶  2. Transfers to Affiliated/Other Party	136101.12	240907.23	
Committees	0.00	0.00	
Contributions to     Federal Candidates/Committees     and Other Political Committees	33034.37	33034.37	
4. Independent Expenditures	7		
(use Schedule E)	358194.44	1491575.13	
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00	
6. Loan Repayments Made	0.00	0.00	
7. Loans Made	0.00	0.00	
8. Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	1000000.00	1000000.00	
man i ditical dominitales			
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
(d) Total Contribution Refunds			
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	1000000.00	1000000.00	
(466 25.66) (6), 4.14 (6),			
9. Other Disbursements	0.00	70448.22	
D. Federal Election Activity (2 U.S.C. §431(20))			
(a) Allocated Federal Election Activity			
(from Schedule H6)	0.00	0.00	
(i) Federal Share	0.00	0.00	
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid Entirely			
With Federal Funds	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00	
Total Disbursements (add Lines 21(c), 22,			
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	1527329.93	2842025.01	
2. Total Federal Disbursements			
(subtract Line 21(a)(ii) and Line 30(a)(ii)			
from Line 31)	1527329.93	2842025.01	

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

	1 LO 1 01111 0X (11cv. 02/2000)		i age <b>o</b>
III. N	Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	otal Contributions (other than loans) rom Line 11(d), page 3)	2066482.73	5372266.00
	otal Contribution Refunds rom Line 28(d))	1000000.00	1000000.00
	et Contributions (other than loans) subtract Line 34 from Line 33)	1066482.73	4372266.00
	otal Federal Operating Expenditures add Line 21(a)(i) and Line 21(b))	136101.12	246967.29
	ffsets to Operating Expenditures rom Line 15, page 3)	0.00	0.00
	et Operating Expenditures subtract Line 37 from Line 36)	136101.12	246967.29

## SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

	FOF	FOR LINE NUMBER: PAGE 6 OF								
Use separate schedule(s)	(che	ck only	or	ne)						
for each category of the Detailed Summary Page	X	11a		11b		11c		12		
		13		14		15		16		17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Planned Parenthood Votes Full Name (Last, First, Middle Initial) Ms. Jennifer Allan Soros Date of Receipt Mailing Address 70-A Greenwich Ave PMB 199 04 06 2016 City Zip Code State Transaction ID: A2016-799099 NY New York 10011-8300 Amount of Each Receipt this Period FEC ID number of contributing C 1000000.00 federal political committee. Memo Item Name of Employer Occupation CEO Give Lively Receipt For: Aggregate Year-to-Date ▼ Primary General 1000000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Matthew Bernstein Date of Receipt Mailing Address 2130 E Lake Rd. NE 04 22 2016 City State Zip Code Transaction ID: A2016-799098 GA Atlanta 30307 Amount of Each Receipt this Period FEC ID number of contributing C 25000.00 federal political committee. Memo Item Name of Employer Occupation **Emory University** Professor Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 25000.00 Full Name (Last, First, Middle Initial) c. Dr. Amy Goldman Fowler Date of Receipt Mailing Address 164 Mountain View Road 04 19 2016 City Zip Code State Transaction ID: A2016-799101 NY Rhinebeck 12572 Amount of Each Receipt this Period FEC ID number of contributing С 1000000.00 federal political committee. Memo Item Name of Employer Occupation Self Author Receipt For: Aggregate Year-to-Date ▼ Primary General

2025000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

1000000.00

Other (specify)

## SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: **PAGE** 7 OF 24 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Planned Parenthood Votes Full Name (Last, First, Middle Initial) Robert Wiley Date of Receipt Mailing Address 9142 North Mercer Way #7301 04 2016 13 City Zip Code State Transaction ID: A2016-799100 WA Mercer Island 98040 Amount of Each Receipt this Period FEC ID number of contributing C 25000.00 federal political committee. Memo Item Name of Employer Occupation None Retired Receipt For: Aggregate Year-to-Date ▼ Primary General 25000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Planned Parenthood Action Fund Date of Receipt Mailing Address 123 William St, 10th Floor 04 30 2016 City State Zip Code Transaction ID: A2016-652250 NY New York 10038 Amount of Each Receipt this Period FEC ID number of contributing 7871.79 federal political committee. Memo Item Name of Employer Occupation Planned Parenthood Action Fund N/A Receipt For: Aggregate Year-to-Date ▼ Primary General In-kind contribution: staff time for strategic federal Other (specify) 76055.02 program work. See Line 21B Full Name (Last, First, Middle Initial) c. Planned Parenthood Action Fund Date of Receipt Mailing Address 123 William St, 10th Floor 04 30 2016 City State Zip Code Transaction ID: A2016-652274 NY New York 10038 Amount of Each Receipt this Period FEC ID number of contributing С 6110.94 federal political committee. Memo Item Name of Employer Occupation Planned Parenthood Action Fund N/A Receipt For: Aggregate Year-to-Date ▼ Primary General In-kind contribution: staff time for accounting and FEC 76055.02 Other (specify) compliance. See Line 21B 38982.73 SUBTOTAL of Receipts This Page (optional)..... 2063982.73 TOTAL This Period (last page this line number only).....

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 8 OF 24					
	EMIZED RECEIPTS		Use separate schedule(s)	(check only one)					
•••	EMIZED RECEIPTS		for each category of the Detailed Summary Page	11a 11b X 11c 12					
				13 14 15 16 17					
	ny information copied from such Reports and Stator commercial purposes, other than using the								
	NAME OF COMMITTEE (In Full)								
	Planned Parenthood Votes								
Α.	Full Name (Last, First, Middle Initial) Longleaf Pine PAC			Date of Receipt					
	Mailing Address 611 Pennsylvania Ave SE #143	3		04 29 2016					
	City	State	Zip Code	Transaction ID: A2016-14817					
	Washington	DC	20003	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C co	0459305	2500.00					
	Name of Employer	Occupation	1	Memo Item Federal PAC					
				— rederal FAC					
	Receipt For: 2016 Primary General	Aggregate	Year-to-Date ▼						
	Other (specify)  Not Applicable		2500.00						
_	Full Name (Last, First, Middle Initial)								
В.	Mailing Address			Date of Receipt					
	Mailing Address			M = M / D = D / Y = Y = Y					
	City	State	Zip Code	<del>-</del>					
	•			Amount of Each Receipt this Period					
	FEC ID number of contributing								
	federal political committee.	C							
	Name of Employer	Occupation	1	Memo Item					
	Receipt For:	Aggregate	Year-to-Date ▼						
	Primary General								
	Other (specify) ▼								
<u>с.</u>	Full Name (Last, First, Middle Initial)			Date of Receipt					
C.	Mailing Address			M = M / D = D / Y = Y = Y					
	011.	0: :	The Oak	_					
	City	State	Zip Code	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С							
	Name of Employer		1	Memo Item					
		Occupation							
	Receipt For:	Aggregate	Year-to-Date ▼						
	Primary General	55 5							
	Other (specify) ▼		7						
г									
۶.	SUBTOTAL of Receipts This Page (optional)			2500.00					
ľ									

TOTAL This Period (last page this line number only).....

2500.00

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 9		
TEMIZED DISBURSEMENTS	for each category of the	(check only o	one) 	
	Detailed Summary Page	27	28a 28b 28c 29 30b	
Any information copied from such Reports and Statem				
or for commercial purposes, other than using the name	ne and address of any political	committee to s	solicit contributions from such committee.	
NAME OF COMMITTEE (In Full)				
Planned Parenthood Votes				
Full Name (Last, First, Middle Initial)			Data of Dichurcoment	
A. Catalist LLC			Date of Disbursement	
Mailing Address 1090 Vermont Ave./Ste. 300			04 15 2016	
	State Zip Code		Transaction ID : B602040	
Washington Purpose of Disbursement	DC 20006		Transaction is . Boozo-ro	
Database Services		001	Amount of Each Disbursement this Period	
Candidate Name		Category/	168.75	
Office Sought: House Disbursen	nent For: 2016	Туре		
	Primary General		Memo Item	
	Other (specify) ▼			
State: District:	Not Applicable			
Full Name (Last, First, Middle Initial)				
3. The Pivot Group			Date of Disbursement	
Mailing Address 1720 I Street NW Suite 550			04 15 2016	
,	State Zip Code DC 20005		Transaction ID : B602046	
Washington Purpose of Disbursement	DC 20005			
Research Services		001	Amount of Each Disbursement this Period	
Candidate Name	-	Category/	494.70	
Office Sought: House Disbursen	nent For: 2016	Туре		
	Primary General		Memo Item	
	Other (specify) ▼			
State: District:	Not Applicable			
Full Name (Last, First, Middle Initial)			Date of Disbursement	
C- 76 Words			Mam / Dab / Yayayay	
Mailing Address 1806 Vernon St, NW #100			04 15 2016	
,	State Zip Code		Transaction ID : B602159	
Washington Purpose of Disbursement	DC 20009		Transaction ib . Booz 100	
Video Production		004	Amount of Each Disbursement this Period	
Candidate Name	-	Category/		
		Туре	4000.00	
	nent For: 2016 Primary General		Memo Item	
	Primary General  Other (specify) ▼			
State: District:	Not Applicable			
<u> </u>				
SUBTOTAL of Disbursements This Page (optional)		·····•	4663.45	
TOTAL This Period (last name this line number only)				

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 10		
TEMIZED DISBURSEMENTS	for each category of the	(check only 21b	one) 22 23 24 25 26	
	Detailed Summary Page	27	28a 28b 28c 29 30b	
Any information copied from such Reports and Statem or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full)				
Planned Parenthood Votes				
Full Name (Last, First, Middle Initial)			Date of Disbursement	
A. Catalist LLC			Date of Disputsement	
Mailing Address 1090 Vermont Ave./Ste. 300			04 19 2016	
	State Zip Code		Transaction ID : B602108	
Washington Purpose of Disbursement	DC 20006			
Database Services		001	Amount of Each Disbursement this Period	
Candidate Name		Category/	5623.50	
Office Sought: House Disbursen	nent For: 2016	Type		
	Primary General		Memo Item	
	Other (specify) ▼			
State: District:	Not Applicable			
Full Name (Last, First, Middle Initial)				
3. Civis			Date of Disbursement	
Mailing Address PO Box 4042			04 15 2016	
City S Chicago	State Zip Code IL 60654		Transaction ID : B602105	
Purpose of Disbursement	- 00004			
Database Services		001	Amount of Each Disbursement this Period	
Candidate Name	-	Category/	640.80	
Office Sought: House Disbursen	nent For: 2016	Туре	Memo Item	
	Primary General		Wello Item	
	Other (specify) ▼			
State: District:	Not Applicable			
Full Name (Last, First, Middle Initial)  Civis			Date of Disbursement	
			M M / D D / Y Y Y Y	
Mailing Address PO Box 4042			04 26 2016	
•	State Zip Code		Transaction ID : B602107	
Chicago Purpose of Disbursement	IL 60654			
Research Services		001	Amount of Each Disbursement this Period	
Candidate Name		Category/		
		Туре	23830.90	
	nent For: 2016 Primary General		Memo Item	
	Primary General  Other (specify) ▼			
State: District:	Not Applicable			
'	• •			
SUBTOTAL of Disbursements This Page (optional)			30095.20	
TOTAL This Period (last nage this line number only)				

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE I	-	PAGE 11 OF 24
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	one) 22 23 28a 28b	24 25 26 28c 29 30b
Any information copied from such Reports and State or for commercial purposes, other than using the na				
NAME OF COMMITTEE (In Full) Planned Parenthood Votes				
Full Name (Last, First, Middle Initial)			Data of Dishawaanaa	-1
A. Planned Parenthood Action Fund	Inc.		Date of Disbursemen	nt
Mailing Address 123 William St, 10th Floor			04 22	2016
City New York	State Zip Code NY 10038		Transaction ID : B	602122
Purpose of Disbursement Advance payment for election and operating expenses.	nses	001	Amount of Each Dis	bursement this Period
Candidate Name	,	Category/ Type		75000.00
Office Sought: House Disburse Senate President	ement For: 2016  Primary General  Other (specify)	Турс	Memo Item	
State: District:	Not Applicable			
Full Name (Last, First, Middle Initial)  Planned Parenthood Action Fund  Mailing Address 123 William St, 10th Floor	Inc.		Date of Disbursement	nt 2016
City	State Zip Code			
New York	NY 10038		Transaction ID : B	599261
Purpose of Disbursement Payment for staff time for fundraising		001	Amount of Each Dis	bursement this Period
Candidate Name	,	Category/ Type		12248.26
Senate	ement For: 2016 Primary General Other (specify)		Memo Item payment for staff time on 2016 M4. See Sch	e for fundraising originally repot n. D
State: District:	Not Applicable			
Full Name (Last, First, Middle Initial)  Planned Parenthood Action Fund	Inc.		Date of Disbursemen	nt
Mailing Address 123 William St, 10th Floor			04 30	2016
City New York	State Zip Code NY 10038		Transaction ID : B	602170
Purpose of Disbursement In-kind: staff time for accounting and FEC complia	nce. See Schedule A	001	Amount of Each Dis	bursement this Period
Candidate Name		Category/ Type		6110.94
Office Sought:    House   Disburse	ement For: 2016 Primary General Other (specify)  Not Applicable		Memo Item In-kind: staff time for a	accounting and FEC complianc
				93359.20
SUBTOTAL of Disbursements This Page (optional).		······	7	13333
TOTAL This Period (last page this line number only	()	_		

SCHEDULE B (FEC Form 3X)	Llos concrete ashadule/-\			IUMBER:		PAG	GE 12 (	OF 24
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check			<b>7</b> 00	□ 04		
	Detailed Summary Page		21b 27	22 28a	23 28b	24 28c	25 29	26 30b
Any information copied from such Reports and Staten	nents may not be sold or use	d by any	perso	n for the p	urpose (	of soliciting	contribu	tions
or for commercial purposes, other than using the name	ne and address of any politica	l committe	ee to	solicit cont	ributions	from such	1 committ	ee.
NAME OF COMMITTEE (In Full)								
Planned Parenthood Votes								
Full Name (Last, First, Middle Initial)								
<ul> <li>Planned Parenthood Action Fund I</li> </ul>	nc.			Date of I				
Mailing Address 123 William St, 10th Floor				04	3	0 7	2016	Y
City	State Zip Code			Tranca	otion ID	. D602171		
New York	NY 10038			iransa	ction iD	: B602171		
Purpose of Disbursement In-kind contribution: staff time for strategic federal p	rogram work. See	001		Amount of	of Each	Disbursem	ent this i	Period
Candidate Name		Category Type	//				7871.	79
Office Sought: House Disbursen	nent For: 2016	.,,,,,,		Mem	o Item			
	Primary General			In-kind co	ntributio	n: staff tim	e for strat	egic federal
	Other (specify)			program v	vork			
State: District:	Not Applicable							
Full Name (Last, First, Middle Initial)  Planned Parenthood Action Fund I	no			Date of I	Dishurse	ement		
· Flamled Parentinood Action Fund i	HC.			M = M	/ D		YY	V
Mailing Address 123 William St, 10th Floor				04		80	2016	
•	State Zip Code NY 10038			Transa	ction ID	: B602172	2	
New York Purpose of Disbursement	10038							
Payment for staff time for fundraising		001		Amount of	of Each	Disbursen	ent this f	Period
Candidate Name		Category Type	//		,	,	14210.	81
Office Sought: House Disbursen	nent For: 2016			Memo	ltem			
	Primary General			See corre	spondin	ng draw dov	vn transa	ction, ID B60
President State: District:	Other (specify) ▼ Not Applicable							
Full Name (Last, First, Middle Initial)	Not Applicable		$\dashv$					
- Planned Parenthood Action Fund I	nc.			Date of I	Disburse	ement		
A4 19 A 11				M M	/ D		γ γ γ	Y
Mailing Address 123 William St, 10th Floor				04	3	0	2016	
City	State Zip Code			T	-4: ID	- DC0047		
New York	NY 10038			iransa	ction ID	: B602173	,	
Purpose of Disbursement Payment for staff time for fundraising		001	٦	Amount o	of Fach	Disbursem	nent this	Period
Candidate Name		Category	//	7		2.000.00	-14210.8	
Office Sought: House Disbursen	nent For: 2016	Туре				7	17210.0	
Senate Disburseri	Primary General			Memo			utian F	l name of a l
	Other (specify)			Drawdow 21b of this		ance to Ac	tion Fund	d reported on
State: District:	Not Applicable				- 1			
CURTOTAL of Dishurasments This Daw (antique)				· · ·	-		7871.	79
SUBTOTAL of Disbursements This Page (optional)			<u> </u>		7			
TOTAL This Period (last page this line number only)			•		- T		135989.	64

TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE I (check only 21b 27	
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam	nents may not be sold or used e and address of any political	by any perso	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Planned Parenthood Votes			
Full Name (Last, First, Middle Initial)  4. Priorities USA Action			Date of Disbursement
Mailing Address 601 13th Street NW Suite 610N			04 01 2016
Washington	State Zip Code DC 20005		Transaction ID : B602038
Purpose of Disbursement Contribution Candidate Name		011	Amount of Each Disbursement this Period
Senate	nent For: 2016  Primary General  Other (specify)   Not Applicable	Category/ Type	33034.37  Memo Item contribution to federal IE PAC
Full Name (Last, First, Middle Initial)  Mailing Address	Not Applicable		Date of Disbursement
	State Zip Code		
Purpose of Disbursement  Candidate Name			Amount of Each Disbursement this Period
		Category/ Type	Memo Item
Full Name (Last, First, Middle Initial)			Date of Disbursement
Mailing Address			
•	State Zip Code		
Purpose of Disbursement  Candidate Name		Category/ Type	Amount of Each Disbursement this Period
	nent For: Primary General Other (specify)		Memo Item
SUBTOTAL of Disbursements This Page (optional)			33034.37
TOTAL This Period (last page this line number only).			33034.37

tor each category of the Detailed Summary Page    21	SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.  NAME OF COMMITTEE (in Full)  Planned Parenthood Votes  Full Name (Last, First, Middle Initial)  Jonathan Allan Scros  Mailing Address  City State Zip Code NY 10011  President Not Applicable  Primary General  Cardgopy'  Full Name (Last, First, Middle Initial)  Amount of Each Disbursement  Candidate Name  City State Zip Code  Primary General  President Not Applicable  Full Name (Last, First, Middle Initial)  Amount of Each Disbursement this Period  Category'  Type  Office Sought: House Primary General  Other (specify) ▼  Date of Disbursement  Candidate Name  Candidate Name  Category'  Type  Office Sought: House Primary General  Other (specify) ▼  Amount of Each Disbursement this Period  Category'  Type  Office Sought: House Primary General  Other (specify) ▼  Amount of Each Disbursement this Period  Category'  Type  Amount of Each Disbursement this Period  Category'  Type  Office Sought: House Primary General  Other (specify) ▼  Amount of Each Disbursement this Period  Category'  Type  Office Sought: House Primary General  Other (specify) ▼  Amount of Each Disbursement this Period  Memo Item  State: Disbursement Tor:  Gandidate Name  Candidate Name  Category'  Type  Memo Item  Amount of Each Disbursement this Period  Memo Item  Amount of Each Disbursement this Period  Memo Item  State: Disbursement Tor:  State: Disbursement Tor:  Office Sought: House Primary General  Other (specify) ▼  Amount of Each Disbursement this Period  Memo Item	TEMIZED DISBURSEMENTS	for each category of the	21b	22 23 24 25 26
NAME OF COMMITTEE (in Full) Planned Parenthood Votes  Full Name (Last, First, Middle Initial) Jonathan Allan Soros  Mailing Address 70A Greenwich Ave PMB 199  City New York Ny 10011 Purpose of Disbursement Contribution Refund Candidate Name Cottribution Refund Amount of Each Disbursement Refund Amount of Each Disbursement C				
A Jonathan Allan Soros  Mailing Address 70A Greenwich Ave PMB 199  City State Zip Code NY 10011  Purpose of Disbursement  Candidate Name  Office Sought: House Priesident State: Disbursement For: 2016  Purpose of Disbursement  Candidate Name  Office Sought: House Senate Priesident State: Disbursement For: State: Disbursement  Candidate Name  Office Sought: House Senate Priesident Other (specify) ▼  Date of Disbursement this Period Category/ Type  Memo Item  Date of Disbursement this Period Category/ Type  Memo Item  Date of Disbursement this Period Category/ Type  Memo Item  Date of Disbursement this Period Category/ Type  Memo Item  Date of Disbursement this Period Category/ Type  Memo Item  Date of Disbursement this Period Category/ Type  Memo Item  Date of Disbursement this Period Category/ Type	NAME OF COMMITTEE (In Full)	a and addition of any politice	. Sommittee to	Solution for such committee.
Mailing Address City State Zip Code New York New York New York New York New York Purpose of Disbursement Contribution Refund Candidate Name Office Sought: House Senate President State: District:  Full Name (Last, First, Middle Initial) Mailing Address City State: Zip Code Purpose of Disbursement Candidate Name Office Sought: House Senate President State: District:  Full Name (Last, First, Middle Initial)  Mailing Address City State: Zip Code  Purpose of Disbursement Candidate Name Office Sought: House President State: District:  Full Name (Last, First, Middle Initial)  Mailing Address City State: Zip Code  Purpose of Disbursement Candidate Name Office Sought: House President Candidate Name Office Sought: House President Candidate Name Office Sought: House President Candidate Name Category/ Type  Memo Item  Amount of Each Disbursement this Period  Category/ Type  Memo Item  Memo Item  SubtrotAL of Disbursement This Page (optional)				Data of Dishuranment
City	Jonathan Allan Soros			
New York	Mailing Address 70A Greenwich Ave PMB 199			04 05 2016
New York Purpose of Disbursement Contribution Refund Candidate Name  Office Sought:  Full Name (Last, First, Middle Initial)  Not Applicable  Purpose of Disbursement Candidate Name  Office Sought:  Full Name (Last, First, Middle Initial)  Not Applicable  Purpose of Disbursement Candidate Name  Office Sought:  Full Name (Last, First, Middle Initial)  Not Applicable  Date of Disbursement  Category/ Type  Amount of Each Disbursement this Period  Category/ Type  Amount of Each Disbursement this Period  Category/ Type  Memo Item  Date of Disbursement this Period  Category/ Type  Amount of Each Disbursement this Period  Category/ Type  Office Sought:  House Senate Purpose of Disbursement  Candidate Name  Office Sought:  Date of Disbursement  Category/ Type  Amount of Each Disbursement this Period  Category/ Type  Memo Item  Memo Item  Office Sought:  Date of Disbursement this Period  Category/ Type  Memo Item  Amount of Each Disbursement this Period  Category/ Type  Memo Item  Amount of Each Disbursement this Period  Category/ Type  Memo Item  Amount of Each Disbursement this Period  Category/ Type  Memo Item  Amount of Each Disbursement this Period  Category/ Type  Memo Item  Amount of Each Disbursement this Period  Category/ Type  Amount of Each Disbursement this Period  Category/ Type  Memo Item  Amount of Each Disbursement this Period  Category/ Type  Memo Item  Amount of Each Disbursement this Period  Category/ Type  Memo Item				Transaction ID : B601546
Contribution Refund Candidate Name  Category'  Type  Office Sought:		NY 10011		
Office Sought:	Contribution Refund		010	Amount of Each Disbursement this Period
Office Sought:	Candidate Name			1000000.00
State: District: Not Applicable  Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  Purpose of Disbursement  Candidate Name  Office Sought: House Primary General President  State: District:  Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  Purpose of Disbursement For: Memo Item  Date of Disbursement this Period  Category/ Type  Date of Disbursement  Candidate Name  Category/ Type  Office Sought: House Disbursement For: Category/ Type  Office Sought: House Disbursement For: Category/ Type  Office Sought: House Disbursement For: Memo Item  State: District: Memo Item  Amount of Each Disbursement this Period  Category/ Type  Office Sought: House Disbursement For: Memo Item  Amount of Each Disbursement this Period  Category/ Type  Memo Item  Memo Item  Amount of Each Disbursement this Period  Category/ Type  Office Sought: House Disbursement For: Memo Item  Amount of Each Disbursement this Period  Category/ Type  Memo Item  Amount of Each Disbursement This Period  Category/ Type  Memo Item  Amount of Each Disbursement This Period  Category/ Type  Memo Item  Amount of Each Disbursement This Period  Category/ Type  Memo Item  Amount of Each Disbursement This Period  Category/ Type  Memo Item  Amount of Each Disbursement This Period  Category/ Type	Senate	Primary General	1,500	Memo Item
Mailing Address  City State Zip Code  Purpose of Disbursement  Candidate Name  Office Sought: House Senate Primary General  Candidate Name (Last, First, Middle Initial)  Date of Disbursement this Period  Category/ Type  Memo Item  Amount of Each Disbursement this Period  Category/ Type  Memo Item  Date of Disbursement this Period  Category/ Type  Memo Item  Amount of Each Disbursement this Period  Category/ Type  Office Sought: House Senate Primary General Category/ Type  Office Sought: House Disbursement For:  Senate Primary General Category/ Type  Memo Item  Memo Item  Memo Item  Substrotal of Disbursement this Period  Category/ Type  Office Sought: House Disbursement For:  Senate Primary General Other (specify) ▼  Substrotal of Disbursements This Page (optional)				
City State Zip Code  Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)  City State Zip Code  Purpose of Disbursement  City State Zip Code  Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House State Zip Code  Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House Primary General Other (specify) ▼  State: District:  State: Disbursement For: General Other (specify) ▼  State: District: Amount of Each Disbursement this Period  Office Sought: House Primary General Other (specify) ▼  State: District:	Full Name (Last, First, Middle Initial)  B.			
Purpose of Disbursement  Candidate Name  Office Sought: House				M = M / D = D / Y = Y = Y = Y
Candidate Name    Category/ Type	City S	itate Zip Code		
Candidate Name  Office Sought: House Senate Primary General Other (specify)   Full Name (Last, First, Middle Initial)  City State Zip Code  Purpose of Disbursement  Candidate Name  Office Sought: House Senate Primary General Other (specify)   Date of Disbursement  Candidate Name  Office Sought: House Senate Primary General Other (specify)   State: District: Memoltem  Amount of Each Disbursement this Period  Amount of Each Disbursement this Period  Office Sought: House Senate Primary General Other (specify)   Substitute: District: Memoltem	Purpose of Disbursement			Amount of Each Disbursament this Pariod
Senate Primary General Other (specify)   Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify)   State: District:  Substortal of Disbursements This Page (optional)	Candidate Name			
Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  Purpose of Disbursement  Candidate Name  Candidate Name  Office Sought: House Senate Primary General Primary General Other (specify)  State: District:  Subtrotal of Disbursements This Page (optional)	Senate President	Primary General		Memo Item
Mailing Address  City State Zip Code  Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House Senate Primary General President State: District:  SUBTOTAL of Disbursements This Page (optional)				
Mailing Address  City State Zip Code  Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House Senate Primary General President Other (specify) ▼  Subtotal of Disbursements This Page (optional)	<b>c.</b>			
Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House Senate Primary General President Other (specify)  State: District:  Subtrotal of Disbursements This Page (optional)	Mailing Address			M = M / D = D / Y = Y = Y
Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify) ▼  Subtrotal of Disbursements This Page (optional)	City	State Zip Code		
Candidate Name  Category/ Type  Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼  State: District:  SUBTOTAL of Disbursements This Page (optional)	Purpose of Disbursement			
Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼  Subtrotal of Disbursements This Page (optional)	Candidate Name			Amount of Each Disbursement this Period
Angeles of Disbursements This Lage (optional)	Senate I President	Primary General	71-	
400000000	SUBTOTAL of Disbursements This Page (ontional)			1000000.00
				100000 00

## SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

**Excluding Loans** 

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

PAGE 15 OF

	9
X	10

24

	ME OF COMMITTEE (In Full) lanned Parenthood Votes			
	A. Full Name (Last, First, Middle Initial) of Debtor  MackCrounse Group	or Creditor		Nature of Debt (Purpose): Canvass literature
	Mailing Address 2001 N. Beauregard St. Ste 420			
	City State	Zip Code		_
	Alexandria	VA	22311	Transaction ID : D439020
	Outstanding Balance Beginning This Period			Transaction ID : D433020
	3950.00	D	are and This Deviced	Outstanding Release at Ober of This Reside
	Amount Incurred This Period	Pay	ment This Period	Outstanding Balance at Close of This Period
	0.00	7	0.00	3950.00
	B. Full Name (Last, First, Middle Initial) of Debtor of	or Creditor		Nature of Debt (Purpose): Production of online adverstisements. See
	76 Words			Schedule E and text on page 16
	Mailing Address 1806 Vernon St, NW #100			
ŀ	City State	Zip Code		-
ŀ	Washington	DC	20009	
	Outstanding Balance Beginning This Period			Transaction ID: D439021
	30654.12			
	Amount Incurred This Period	Pay	ment This Period	Outstanding Balance at Close of This Period
	0.00		14895.00	15759.12
	C. Full Name (Last, First, Middle Initial) of Debtor Stones' Phones	or Creditor		Nature of Debt (Purpose): Persuasion phone calls. See Schedule E
	Mailing Address 41-750 Rancho Las Palmas Dr #E	E-3		
	City	State	Zip Code	-
	Rancho Mirage	CA	92270	
	Outstanding Balance Beginning This Period			Transaction ID: D439022
	19379.01	Dov	ment This Deviced	Outstanding Polones at Class of This Povied
	Amount Incurred This Period	Pay	ment This Period	Outstanding Balance at Close of This Period 19379.01
	0	7	0	19379.01
1)	SUBTOTALS This Period This Page (optional)			39088.13
2)	TOTALS This Period (last page this line number of	only)	<b>&gt;</b>	
3)	TOTAL OUTSTANDING LOANS from Schedule C	(last page or	nly)	
4)	ADD 2) and 3) and carry forward to appropriate li	ne of Summa	ry Page (last page only) ▶	

### : 97 A = G7 9 @ 5 B9 CI G'H9 LHF9 @ 5 H98 'HC'5 F9 DCFHZ G7 < 98 I @ 'CF' ± H9 A ± N5 H± CB

Form/Schedule: SD10 Transaction ID:

This report is being amended to update Schedule D and corresponding year-to-date totals to reflect the Committee's amended M3 report filed on July 20, 2016.

Form/Schedule: SD10 Transaction ID:

Regarding the debt to 76 Words (D439021) and three corresponding IEs (B595398, B595399, and B595400): due to a typographical error, the three IEs were originally reported on a 24-hour notice 2/25/16 and on the M3 report as totalling \$14985. When the final invoice of \$14895 was received and paid in April, the error was discovered. The debt and IEs have been corrected in this report.

## SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

**Excluding Loans** 

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

PAGE

	9
X	10

24

17 OF

NAME OF COMMITTEE (In Full) Planned Parenthood Votes A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Online advertising. See Schedule E Blueprint Interactive Mailing Address 2229 North Pollard St State Zip Code Arlington 22207 Transaction ID: D439023 Outstanding Balance Beginning This Period 10500.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 10500.00 0.00 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Full Payment of Translation fees See Schedule Itzamna Translations Company Mailing Address P.O. Box 1015 City State Zip Code Glendale 85311 ΑZ Outstanding Balance Beginning This Period Transaction ID: D439024 124.44 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 124.44 0.00 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Full Payment for staff time for fundraising See Planned Parenthood Action Fund Schedule B Mailing Address 123 William St, 10th Floor Zip Code City State 10038 New York NY Transaction ID: D439025 Outstanding Balance Beginning This Period 12248.26 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 12248.26 10500.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

## SCHEDULE D (FEC Form 3X) **DEBTS AND OBLIGATIONS**

**Excluding Loans** 

(Use separate schedule(s) for each numbered line)

PAGE FOR LINE NUMBER: (check only one)

	9
X	10

24

18 OF

NAME OF COMMITTEE (In Full) Planned Parenthood Votes A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Production Fees: Television Adversement See SKDKnickerbocker LLC schedule E Mailing Address 1150 18th Street NW/Ste. 800 State Zip Code Washington 20036 Transaction ID: D439027 Outstanding Balance Beginning This Period 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 16794.22 16794.22 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailing Address City State Zip Code Outstanding Balance Beginning This Period Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailing Address City State Zip Code Outstanding Balance Beginning This Period Payment This Period Amount Incurred This Period Outstanding Balance at Close of This Period 16794.22 1) SUBTOTALS This Period This Page (optional)..... 66382.35 2) TOTALS This Period (last page this line number only)..... 0.00 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)...... 66382.35 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

	E E (FEC Form 3) NDEPENDENT EXPEND					PAGE 19	OF 24
NAME OF CO	MMITTEE (In Full)						24 OF FORM 3X
	Parenthood Votes				FEC	IDENTIFICATI	ON NUMBER ▼
	aronineda vetes				C	C00489799	
Check if 2	24-hour report 48-hour	report New repo	ort Amends repo	ort filed	on	/ D = D /	Y Y Y Y Y
Full Name			☐ Memo I	tem	Date of Pub	olic Distribution	/Dissemination
Waterfro	ont Strategies				M M M	/ 19 /	2016
Mailing Ad	dress 3050 K Street/Ste. 100				Amount		
City		State	Zip Code				343175.00
Washingto	n	DC	20007		Transaction	ID : B599464	010110.00
			1			bursement or (	Obligation
	f Expenditure  /: Television Advertisement		Category/ Type 004		04	18	2016
Name of F	ederal Candidate		Support	Office	Sought:	House	District:
Kelly Ayot	te		Oppose		President	X Senate	State: NH
	dar Year-To-Date lection for Office Sought		343175.00	Disbu 2016	Other (	✓ Primary specify) ►	General
Full Name	of Payee		X Memo Ite	em	Date of Pub	olic Distribution	/Dissemination
	nickerbocker LLC				M M M 04	/ 19 /	2016
Mailing Ad	dress 1150 18th Street NW/S	te. 800			Amount		
City		State	Zip Code				16794.22
Washingto	on	DC	20036			ID : B599463	Oblination
Purpose o	f Expenditure		Catamanul	_		bursement or (	
	n Fees: Television Adverseme	nt	Category/ Type 004	4	04	19	2016
Name of F	ederal Candidate		X Support	Office	Sought:	House	District:
Kelly Ayot	te		Oppose		President	X Senate	State: NH
	ndar Year-To-Date Election for Office Sought		359969.22	Disbu 2016		✓ Primary specify) ►	/ General
				<u> </u>			
(a) SUBTO	TAL of Itemized Independent	Expenditures		▶			343175.00
(b) SUBTO	TAL of Unitemized Independent	nt Expenditures		··· <b>•</b>		<i></i>	
(c) TOTAL	Independent Expenditures			··· <b>•</b>		p 1 2 2 2 2	1 4 1
Under nena	Ity of periury I certify that the	independent expenditures	reported herein were	not ma	ade in cooper	ation, consulta	tion, or concert

with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Deirdre Schifeling	[Electronically Filed]	Date	05 /	20	/	2016
Signature						

### S IT

nage# 201607209020728325  CHEDULE E (FEC Form 3X)	
EMIZED INDEPENDENT EXPENDITURES	PAGE 20 OF 24 FOR LINE 24 OF FORM 3X
AME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
AME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼  C C00489799

Planned F	Parenthood Votes				C C00489799
Check if 2	4-hour report 48-hour report	New rep	oort Amends repo	ort filed	on M = M / D = D / Y = Y = Y
Full Name			Memo It	em	Date of Public Distribution/Dissemination
	Translations Company				02 17 2016
Mailing Add	dress P.O. Box 1015				Amount
City		State	Zip Code		2.59
Glendale		AZ	85311	1	Fransaction ID : B598485 Date of Disbursement or Obligation
Payment fo	Expenditure or IE (B598485) originally reported on 20 e Schedule D	)16 FEC M3	Category/ Type 004		04 26 2016
Name of Fe	ederal Candidate		X Support	Office	Sought: House District:
Hillary Clint	on		Oppose		President Senate State: NV
	dar Year-To-Date ection for Office Sought	7 7	1189488.69	Disbur 2016	sement For:
Full Name Itzamna	of Payee a Translations Company		☐ Memo Ite	m	Date of Public Distribution/Dissemination
Mailing Add	dress P.O. Box 1015				02 17 2016 Amount
City		Stata	7in Code		2 59
City Glendale		State AZ	Zip Code 85311	-	2.59  Transaction ID: B598486  Date of Disbursement or Obligation
Glendale  Purpose of Payment for	Expenditure or IE (B598486) originally reported on 20 e Schedule D	AZ	•		Transaction ID : B598486
Purpose of Payment for Report. See	or IE (B598486) originally reported on 2	AZ	85311 Category/ 004		Transaction ID : B598486  Date of Disbursement or Obligation
Purpose of Payment for Report. See	or IE (B598486) originally reported on 20 e Schedule D ederal Candidate	AZ	85311  Category/ Type  004	Office	Transaction ID : B598486  Date of Disbursement or Obligation  M M M / 26 / 2016
Glendale  Purpose of Payment for Report. See Name of F  Hillary Clin	or IE (B598486) originally reported on 20 e Schedule D ederal Candidate	AZ	85311  Category/ Type  O04  Support	Office	Transaction ID: B598486 Date of Disbursement or Obligation  M 04
Purpose of Payment for Report. See Name of F Hillary Clin  Calend Per El  (a) SUBTOT	or IE (B598486) originally reported on 20 e Schedule D ederal Candidate ton dar Year-To-Date	AZ 016 FEC M3  uresditures	Support Oppose  1189488.69	Office  Disbut 2016	Transaction ID: B598486  Date of Disbursement or Obligation  M 04
Glendale  Purpose of Payment for Report. See Name of F  Hillary Clin  Calendale  (a) SUBTOT  (b) SUBTOT  (c) TOTAL I  Under penaltwith, or at the	or IE (B598486) originally reported on 20 e Schedule D ederal Candidate ton  dar Year-To-Date lection for Office Sought  TAL of Itemized Independent Expenditure Independent Expenditures	AZ  016 FEC M3  ures  ditures  dent expenditures date or authorized	Support Oppose  1189488.69	Office  Disbut 2016	Transaction ID: B598486  Date of Disbursement or Obligation  M M M / 26 / 2016  Sought: House District:  President Senate State: TX  resement For:  Primary General  Other (specify) ▶
Glendale  Purpose of Payment for Report. See Name of F  Hillary Clin  Calendale  (a) SUBTOT  (b) SUBTOT  (c) TOTAL I	or IE (B598486) originally reported on 20 e Schedule D ederal Candidate ton  dar Year-To-Date lection for Office Sought  TAL of Itemized Independent Expenditure Independent Expenditures	AZ  016 FEC M3  ures  ditures  dent expenditures date or authorized ts agent.	Support Oppose  1189488.69	Office  Disburg 2016   not mad f either,	Transaction ID: B598486  Date of Disbursement or Obligation    M

## SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

PAGE			F :	24
FOR	LINE	24 OF	FOR	м зх

		FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Planned Parenthood Votes		C C00489799
Check if 24-hour report 48-hour report New rep	port Amends repor	t filed on
Full Name of Payee	☐ Memo Ite	m Date of Public Distribution/Dissemination
Itzamna Translations Company		02 17 2016
Mailing Address P.O. Box 1015		Amount
City State	Zip Code	2.59
Glendale AZ	85311	Transaction ID : B598487  Date of Disbursement or Obligation
Purpose of Expenditure Payment for IE (B598487) originally reported on 2016 FEC M3 Report.See Schedule D	Category/ Type 004	04 / 26 / 2016
Name of Federal Candidate	X Support	Office Sought: House District:
Hillary Clinton	Oppose	President Senate State: MI
Calendar Year-To-Date Per Election for Office Sought		Disbursement For:
	☐ Memo Iten	
Full Name of Payee Itzamna Translations Company	Memorien	Date of Public Distribution/Dissemination  Date of Public Distribution/Dissemination  1
Mailing Address P.O. Box 1015		Amount
City State	Zip Code	2.59
Glendale AZ	85311	Transaction ID: B598488  Date of Disbursement or Obligation
Purpose of Expenditure Payment for IE (B598488) originally reported on 2016 FEC M3 Report.See Schedule D	Category/ Type 004	04 / 26 / 2016
Name of Federal Candidate	X Support	Office Sought: House District:
Hillary Clinton	Oppose	President Senate State: VA
Calendar Year-To-Date Per Election for Office Sought	1189488.69	Disbursement For:
(a) SUBTOTAL of Itemized Independent Expenditures(b) SUBTOTAL of Unitemized Independent Expenditures		5.18
(b) SOBTOTAL OF Officeringed independent Experiantiles		7 7 7
(c) TOTAL Independent Expenditures		<b>•</b>
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorize party committee) any political party committee or its agent.		
Deirdre Schifeling [Electron	nically Filed] Date	05 20 2016
Signature		

## SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

PAGE		OF		
FOR L	INE 24	OF	FORM	3X

		FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Planned Parenthood Votes		C C00489799
Check if 24-hour report 48-hour report New re	port Amends repor	rt filed on
Full Name of Payee	☐ Memo Ite	Date of Public Distribution/Dissemination
Itzamna Translations Company		02 17 7 2016
Mailing Address P.O. Box 1015		Amount
City State	Zip Code	111.49
Glendale AZ	85311	Transaction ID: B598489  Date of Disbursement or Obligation
Purpose of Expenditure Payment for IE (B598489) originally reported on 2016 FEC M3 Report.See Schedule D	Category/ Type 004	04 / 26 / 2016
Name of Federal Candidate	X Support	Office Sought: House District:
Nationwide Unitemized	Oppose	President Senate State: US
Calendar Year-To-Date Per Election for Office Sought	8168.61	Disbursement For:
Full Name of Payer	☐ Memo Iter	
Full Name of Payee Itzamna Translations Company	_ memoriter	Date of Public Distribution/Dissemination  02  17  2016
Mailing Address P.O. Box 1015		Amount
City State	Zip Code	2.59
Glendale AZ	85311	Transaction ID: B598730  Date of Disbursement or Obligation
Purpose of Expenditure Payment for IE (B598490) originally reported on 2016 FEC M3 Report.See Schedule D	Category/ Type 004	04 / 26 / 2016
Name of Federal Candidate	X Support	Office Sought: House District:
Hillary Clinton	Oppose	President Senate State: SC
Calendar Year-To-Date Per Election for Office Sought	1189488.69	Disbursement For:
(a) SUBTOTAL of Itemized Independent Expenditures		114.08
(b) SUBTOTAL of Unitemized Independent Expenditures		<b>&gt;</b>
(c) TOTAL Independent Expenditures		<b>&gt;</b>
Under penalty of perjury I certify that the independent expenditure with, or at the request or suggestion of, any candidate or authorize party committee) any political party committee or its agent.		
Deirdre Schifeling [Electro	onically Filed] Date	05 20 2016
Signature		

### SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

PAGE	23	OF	24	
FOR LI	NE 24	OF F	ORM 3X	
ENTIFIC	CATIO	N NUM	BER ▼	

		TOTT LINE 24 OF TOTAL 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Planned Parenthood Votes		C C00489799
Check if 24-hour report 48-hour report	New report Amends report file	d on M M / D D / Y Y Y Y Y
Full Name of Payee 76 Words	Memo Item	Date of Public Distribution/Dissemination
Mailing Address		02 / 24 / 2016
1806 Vernon St, NW #100		Amount
City State	e Zip Code	8073.85
Washington DC	20009	Transaction ID : B595398  Date of Disbursement or Obligation
Purpose of Expenditure Pymt. for IE (B595398) rptd. on 2016 FEC M3 rpt.; note corrected amt.; see SchD and text on page 16	Category/ Type 004	04 / 28 / 2016
Name of Federal Candidate	X Support Office	ce Sought: House District:
Hillary Clinton	Oppose	President Senate State: TX
Calendar Year-To-Date Per Election for Office Sought	1189488.69 Disk 2010	
	- Marrie Herri	Other (specify) -
Full Name of Payee 76 Words	☐ Memo Item	Date of Public Distribution/Dissemination
Mailing Address 1806 Vernon St, NW #100		02 24 2016 Amount
City Stat	e Zip Code	3279.80
Washington DC	·	Transaction ID : B595399  Date of Disbursement or Obligation
Purpose of Expenditure Pymt. for IE (B595399) rptd. on 2016 FEC M3 rpt.; note corrected amt.; see SchD and text on page 16	Category/ Type 004	04 28 2016
Name of Federal Candidate	X Support Offic	ce Sought: House District:
Hillary Clinton		President Senate State: MI
Calendar Year-To-Date Per Election for Office Sought	1189488.69 Disl 201	oursement For:
<ul><li>(a) SUBTOTAL of Itemized Independent Expenditures</li><li>(b) SUBTOTAL of Unitemized Independent Expenditures</li><li>(c) TOTAL Independent Expenditures</li></ul>	······	11353.65
Under penalty of perjury I certify that the independent exp with, or at the request or suggestion of, any candidate or party committee) any political party committee or its agent.	authorized committee or agent of eith	
Deirdre Schifeling	[Electronically Filed] Date	05 20 2016
Signature	Date	

## SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

PAGE	24	OF	24	
FOR L	INE 2	24 OF	FORM	ЗХ

NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼			
Pla	anned Parenthood Votes		C C00489799
Che	ck if 24-hour report 48-hour report New report	ort Amends repo	ort filed on
	Full Name of Payee	☐ Memo Ite	em Date of Public Distribution/Dissemination
	76 Words		02 24 2016
	Mailing Address 1806 Vernon St, NW #100		Amount
	City State	Zip Code	3541.35
L	Washington DC	20009	Transaction ID : B595400  Date of Disbursement or Obligation
- 1	Purpose of Expenditure Pymt. for IE (B595400) rptd. on 2016 FEC M3 rpt.; note corrected amt.; see SchD and text on page 16	Category/ Type 004	04 / 28 / 2016
	Name of Federal Candidate	X Support	Office Sought: House District:
	Hillary Clinton	Oppose	President Senate State: VA
	Calendar Year-To-Date Per Election for Office Sought	1189488.69	Disbursement For:
╌	E III Name of Davis	☐ Memo Ite	
	Full Name of Payee	□ Memorite	Date of Public Distribution/Dissemination
ŀ	Mailing Address		Amount
	City State	Zip Code	
-	Purpose of Expenditure		Date of Disbursement or Obligation
	rulpose of Experialitie	Category/ Type	M M / D D / Y Y Y Y
-	Name of Federal Candidate	Support	Office Sought: House District:
		Oppose	President Senate State:
	Calendar Year-To-Date		Disbursement For: Primary General
	Per Election for Office Sought		Other (specify) ▶
(á	a) SUBTOTAL of Itemized Independent Expenditures		. > 3541.35
(b) SUBTOTAL of Unitemized Independent Expenditures			
(0	e) TOTAL Independent Expenditures		358194.44
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
	Deirdre Schifeling [Electron	ically Filed] Date	05 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Signature	_ · · · Date	